

The logo icon for Recovery Works is a green circle containing a white stylized figure of a person with arms raised, set against a background of two green leaf-like shapes.

# Recovery Works

INDIANA'S FORENSIC TREATMENT PROGRAM

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# Working with Justice Involved Individuals

## Adapted from:

- **Toward Creating A Trauma Informed Criminal Justice System**  
Publisher: Policy Research Associates
- **Trauma-Informed Care in Behavioral Health Services**  
Publisher: SAMHSA
- **Trauma Training for Criminal Justice Providers**  
Publisher: National Centers for PTSD
- **A National Center for PTSD Fact Sheet**  
Publisher: National Center for PTSD
- **Implementing Evidence-Based Practice in Community Corrections:  
The Principles of Effective Intervention**
- Publisher: National Institute of Corrections
- **Working with People with Mental Illness Involved in the Criminal  
Justice System: What Mental Health Service Providers Need to Know**  
Publisher: Technical Assistance & Policy Analysis Center for Jail Diversion

# Presenter

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# Outline

1. Learning Objectives
2. Data
3. Criminogenic Needs
4. Restorative Justice Model
5. Trauma Informed Care
6. The Way Forward

# Learning Objectives

1. Explain the importance of criminogenic factors.
2. Understand the FOUR most influential criminogenic factors.
3. Be able to DEFINE Trauma-Informed Care.
4. Know the SIX Key Principles of a Trauma-Informed Approach.
5. Be able to EXPLAIN the importance of the Trauma and Recovery when working with justice involved individuals.
6. Understand the importance of working collaboratively with criminal justice providers.

# Sheriffs: Help needed to cope with mentally ill

September 15, 2014



INDIANAPOLIS - A sheriff says county jails have become the "insane asylums" for Indiana as state inpatient care for the mentally ill has disintegrated.



## Seriously Mentally Ill

- 14.5% men, 31% women in jails
- 16% of prisons
- 9% probation, 7% parole
- **General Public is 5.4%**
  - Adults with a serious mental illness (SMI) are defined by SAMHSA as “persons age 18 and over, who currently or at any time during the past year, have had a diagnosable mental, behavioral, or emotional disorder of sufficient duration to meet diagnostic criteria specified within the [DSM-IV], resulting in functional impairment which substantially interferes with or limits one or more major life activities” (CSAT, 1998, p. 265).

# Addiction

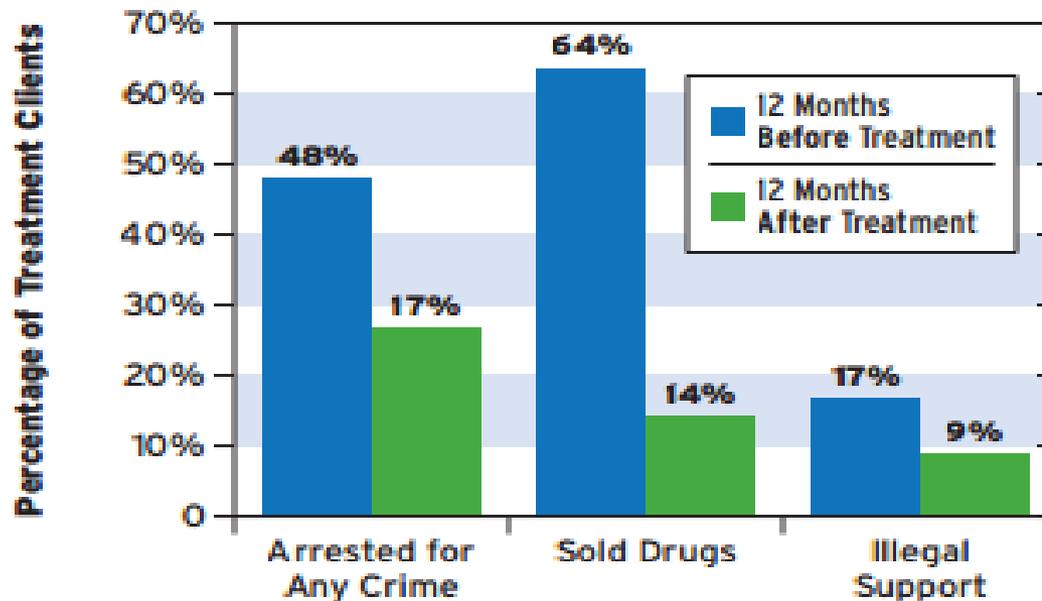
- 53% of State and 45% of Federal prisoners
- 75% of prisoners returning to prison
- 68% of jail inmates
- **General Public is 8.8%**
  - According to SAMHSA, “substance use disorders occur when the recurrent use of alcohol and/or drugs causes clinically and functionally significant impairment, such as health problems, disability, and failure to meet major responsibilities at work, school, or home.”

## Recidivism with Treatment

- Average Recidivism 20% reduction overall
  - 8.2% reduction in felony reconvictions for general offenders
  - 6.3% reduction for returns to prison
  - 4.7% reduction of reconvictions

# Treatment Works

**Figure 5.3.** Changes in Criminal Activity Before vs. After Treatment



Source: National Treatment Improvement Evaluation Survey, Gerstein et al. (1997).

# Criminogenic Risk and Needs Matter

- *Criminogenics*: The study of specific needs that must be addressed in order to habilitate criminal offenders and achieve lower recidivism rates.
- *Criminogenic Needs*: In studying recidivism, researchers have shown that there are a number of "static" factors that are predictive. These factors have been associated with recidivism and can be changed.

# Criminogenic Risk and Needs Matter

- Anti-social personality
- Anti-social attitudes and values
- Anti-social associates
- Family dysfunction
- Poor self-control, poor problem-solving skills
- Substance abuse
- Lack of employment/employment skills

# “Central Eight” Criminogenic Risk Factors

Risk Factor	Need
History of antisocial behavior	Build alternative behaviors
Antisocial personality pattern	Problem solving skills, anger management
Antisocial cognition	Develop less risky thinking
Antisocial associates	Reduce association with criminal others
Family and/or marital discord	Reduce conflict, build positive relationships
Poor school and/or work performance	Enhance performance, rewards
Few leisure or recreation activities	Enhance outside involvement
Substance abuse	Reduce use through integrated treatment

Council of State Governments Justice Center, 2013

# The Four Most Influential

The four most influential criminogenic needs are dynamic risk factors, that when addressed, can significantly affect the offender's risk for recidivism.

1. Antisocial Cognition
2. Antisocial Personality
3. Antisocial Associates (peers)
4. Family/Marital Issues

# Antisocial Cognition

**Defined: Antisocial attitudes, values, beliefs and rationalization**

**Goal: Reduce antisocial cognition, recognize cognitive triggers, recognize risky thinking and feelings, and adopt alternative cognitions.**

# Antisocial Personality

**Defined: Impulsive, adventurous, pleasure seeking, restlessly aggressive and irritable.**

**Goal: Build problem solving, self-regulation, anger awareness, and coping skills that help to maintain equanimity.**

# Antisocial Associates

**Defined: Antisocial or criminal friends and isolation from pro-social others.**

**Goal: Reduce association with criminal peers, enhance contact with pro-social peers and friends.**

# Family/Marital Issues

**Defined: Inappropriate parental monitoring and disciplining, poor family relationships.**

**Goal: Reduce conflict, build positive relationships, and develop/enhance healthy communication.**

# Criminogenic Interventions

- Targeted and timely evidence-based treatment interventions will provide the greatest long-term benefit to the community, the victim, and the offender.
- Cognitive-based behavioral interventions have been shown to be highly effective.
- Motivation to change matters.

# Criminogenic Interventions

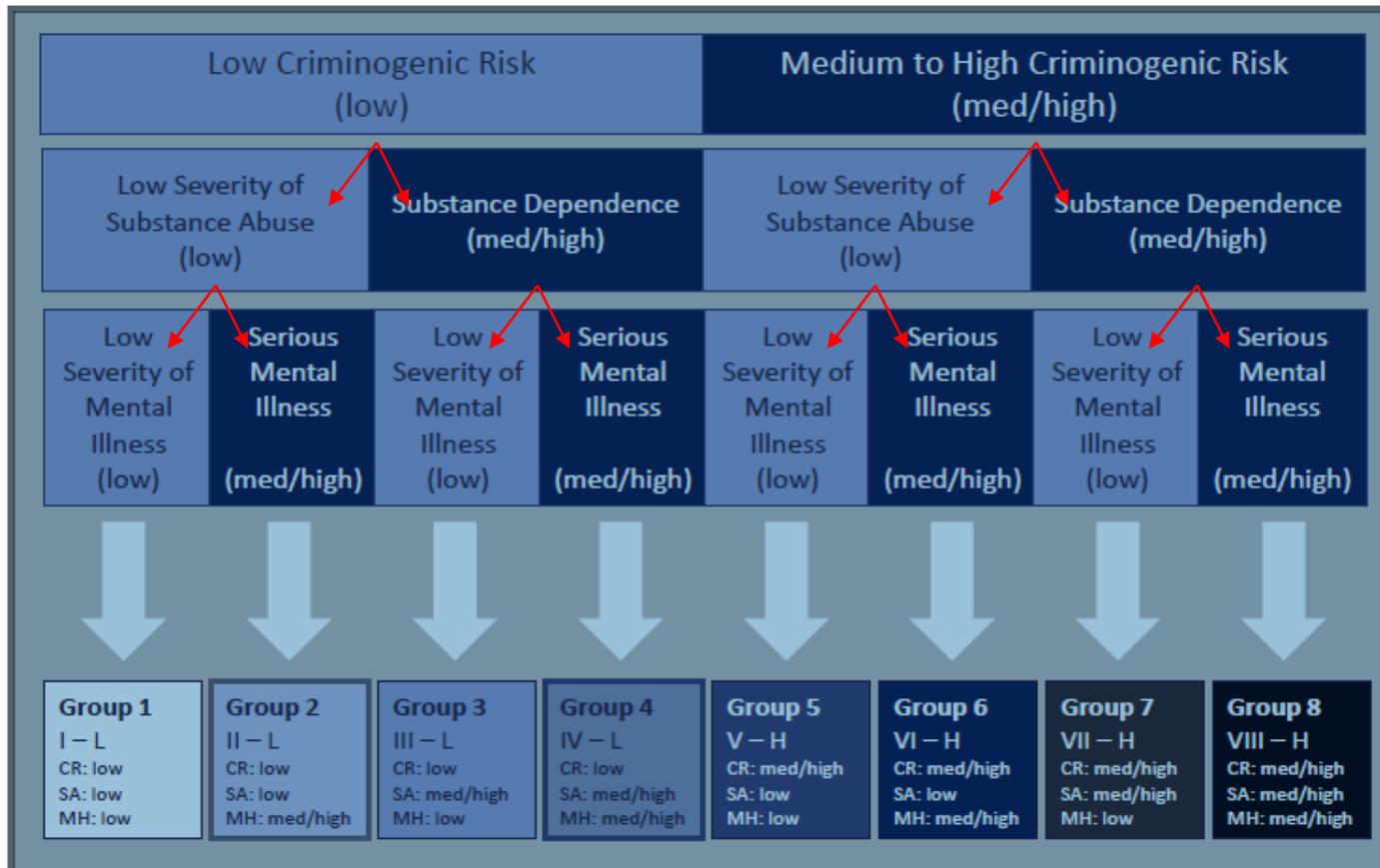
- Hope matters. Research has shown that peers who are successfully engaging in the recovery positively influences internal narratives and motivation to change.
- Realign and actively engage pro-social supports (family members, spouses, peers, and supportive others) for offenders in their communities.

# Criminogenic Interventions

Research has shown that certain types of interventions do not work:

- Boot camps
- Punishment-oriented programs
- Control-oriented programs

## Criminogenic Risk and Behavioral Health Needs Framework



# Victimization

Victimization can take many forms:

- Economic (having commissary items stolen)
- Coercive (being forced to perform chores)
- Manipulation (being forced to accept blame for infractions)
- Physical (being physically or sexually assaulted by another inmate)

# Experience

Each person's experiences during incarceration will be shaped by a wide variety of factors, including:

- Severity and nature of mental illness
- Coping skills and adaptive capacity
- Supports within the facility
- Supports from the community
- Access to effective treatment

# Restorative Justice Model

**Restorative justice** is an approach to [justice](#) that focuses on the needs of the victims and the offenders, as well as the involved community. This contrasts to more [punitive](#) approaches where the main aim is to punish the offender, or satisfy abstract legal principles.

# Trauma-Informed Care

- Trauma-informed care is an approach used to engage people with histories of trauma. It recognizes the presence of trauma symptoms and acknowledges the role that trauma can play in people's lives.
- Trauma-informed criminal justice responses can help to avoid re-traumatizing individuals.

# Trauma-Informed Care

- A trauma-informed approach increases safety for all, decreases the chance of an individual returning to criminal behavior, and supports the recovery of justice-involved women and men with serious mental illness.
- Partnerships across systems can also help link individuals to trauma-informed services and treatment.

# Trauma Informed Care

- DMHA recognizes that the majority of people who have behavioral health issues and are involved with the justice system have significant histories of trauma and exposure to personal and community violence.

# Trauma Informed Care

- Involvement with the justice system can further trauma for these individuals and create complex trauma.
- Traumatic events can include physical and sexual abuse, neglect, bullying, community-based violence, disaster, terrorism, and war.

# Trauma Informed Care

These experiences can:

- Challenge a person's capacity for recovery
- Pose significant barriers to accessing services
- Result in an increased risk of interacting with the criminal justice system

# Trauma Informed Care

- Fifty to ninety percent of all adults and children are exposed to a psychologically traumatic event (such as a life-threatening assault or accident, human-caused or natural disaster, or war) at some point in their lives.

# Trauma Informed Care

- Recognition of the high rates of trauma and post-traumatic stress disorder among justice-involved individuals is vital.
- It is estimated that 85 percent of women in correctional settings have an early experience of physical and or sexual abuse.

# Trauma Informed Care

- Other reports estimate even higher lifetime experience of traumatic events and show little difference between genders on the prevalence of trauma and abuse.
- A recent study of people (both women and men) participating in jail diversion programs across the country, almost universally, reported a history of significant traumatic experience prior to incarceration (95.5% and 88.6% respectively).

# Trauma Informed Care

- As many as 67% of trauma survivors experience lasting psychosocial impairment, including post-traumatic stress disorder (PTSD); panic, phobic, or generalized anxiety disorders; depression; or substance abuse.

# Trauma Informed Care

Studies show that many patients who seek physical healthcare have been exposed to trauma and experience PTSD but have not received appropriate mental health care.

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# Trauma Informed Care

A trauma-informed approach, program, organization, or system:

1. Realizes the widespread impact of trauma and understands potential paths for recovery;
2. Recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system;
3. Responds by fully integrating knowledge about trauma into policies, procedures, and practices; and
4. Seeks to actively resist re-traumatization.

# Trauma Informed Care

- A trauma-informed approach can be implemented in any type of service setting or organization and is distinct from trauma-specific interventions or treatments that are designed specifically to address the consequences of trauma and to facilitate healing.
- A trauma-informed approach is aligned with current research in psychoneuroimmunology, cognitive neuroscience, health psychology, and epigenetics.

# Six Key Principles of a Trauma-Informed Approach

A trauma-informed approach reflects adherence to six key principles rather than a prescribed set of practices or procedures. These principles may be generalizable across multiple types of settings, although terminology and application may be setting- or sector-specific:

1. Safety
2. Trustworthiness and Transparency
3. Peer support
4. Collaboration and mutuality
5. Empowerment, voice and choice
6. Cultural, Historical, and Gender Issues

# Trauma-Specific Interventions

Trauma-specific intervention programs generally recognize the following:

- The survivor's need to be respected, informed, connected, and hopeful regarding their own recovery
- The interrelation between trauma and symptoms of trauma such as substance abuse, eating disorders, depression, and anxiety.
- The need to work in a collaborative way with survivors, family and friends of the survivor, and other human services agencies in a manner that will empower survivors and consumers

# The Way Forward

- What does an unsuccessful program look like?
- What does a successful program look like?

# The Way Forward

Evidence-based practice implies the following:

- There is a definable outcome(s).
- It is measurable.
- It is defined according to practical realities (recidivism, victim satisfaction, etc.).

# The Way Forward

- Care providers should work to be have a strong knowledge of the criminal justice system.
- Clinicians should use trauma-informed and evidenced based methods to constructively enhance intrinsic motivation in offenders.
- Research indicates that motivational interviewing techniques, rather than persuasion tactics, effectively enhance motivation for initiating and maintaining behavior changes.

# Ongoing Collaboration

- Build Bridge from Jail to Treatment in the Community
- Development of a coalition effort that supports holistic recovery
- Understand the unique experiences of justice involved individuals.



INDIANA'S FORENSIC TREATMENT PROGRAM



# Ongoing Collaboration

- It is critical that treatment professionals and communities develop coalitions to reduce stigma and promote the role of resilience, resistance, and recovery in prevention, health promotion, and treatment.

# Ten Fundamental Components of Recovery

1. Recovery emerges from hope
2. Recovery is person-driven
3. Recovery occurs via many pathways
4. Recovery is holistic
5. Recovery is supported by peers and allies
6. Recovery involves individual, family, and community strengths and responsibility
7. Recovery is supported through relationship and social networks
8. Recovery is culturally-based and influenced
9. Recovery is supported by addressing trauma
10. Recovery is based on respect

# Recovery

In the final report of the New Freedom Commission on Mental Health:

***Recovery*** refers to the process in which people are able to live, work, learn, and participate fully in their communities. For some individuals, recovery is the ability to live a fulfilling and productive life despite a disability. For others, recovery implies the reduction or complete remission of symptoms. Science has shown that having hope plays an integral role in an individual's recovery.

# Resilience

In the final report of the New Freedom Commission on Mental Health:

***Resilience*** means the personal and community qualities that enable us to rebound from adversity, trauma, tragedy, threats, or other stresses – and to go on with life with a sense of mastery, competence, and hope. We now understand from research that resilience is fostered by a positive childhood and includes positive individual traits, such as optimism, good problem-solving skills, and treatments. Closely knit communities and neighborhoods are also resilient, providing supports for their members.

(New Freedom Commission Report, 2003)



# Questions

Email [Recovery.Works@fssa.IN.gov](mailto:Recovery.Works@fssa.IN.gov)

Website: [www.recoveryworks.fssa.in.gov](http://www.recoveryworks.fssa.in.gov)

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